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Bib Data Sheet

CONFIRMATION NO. 7001

SERIAL NUMBER 10/608,650	FILING DATE 06/27/2003 RULE	CLASS 131	GROUP ART UNIT 1731	ATTORNEY DOCKET NO. 4275-007 (0007.6)
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APPLICANTS

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** CONTINUING DATA ***** N/A

** FOREIGN APPLICATIONS ***** N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 09/15/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 4	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance	Verified and Acknowledged Examiner's Signature	INITIALS		

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TITLE
 Perforated capsule filter

FILING FEE RECEIVED 558	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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